



Early Journal Content on JSTOR, Free to Anyone in the World

This article is one of nearly 500,000 scholarly works digitized and made freely available to everyone in the world by JSTOR.

Known as the Early Journal Content, this set of works include research articles, news, letters, and other writings published in more than 200 of the oldest leading academic journals. The works date from the mid-seventeenth to the early twentieth centuries.

We encourage people to read and share the Early Journal Content openly and to tell others that this resource exists. People may post this content online or redistribute in any way for non-commercial purposes.

Read more about Early Journal Content at <http://about.jstor.org/participate-jstor/individuals/early-journal-content>.

JSTOR is a digital library of academic journals, books, and primary source objects. JSTOR helps people discover, use, and build upon a wide range of content through a powerful research and teaching platform, and preserves this content for future generations. JSTOR is part of ITHAKA, a not-for-profit organization that also includes Ithaka S+R and Portico. For more information about JSTOR, please contact support@jstor.org.

compliment I ever thought I, as a hospital nurse, received was, that I was put to clean and 'do' the special ward, with the severest medical or surgical case, which I was nursing every day, because I did it thoroughly and without disturbing the patient."

These addresses were written in the silence of her room. She says in one of them, "A sick ward ought to be as quiet as a sickroom, and a sickroom, I need not say, ought to be the quietest place in God's kingdom.

She made hers a place of active work and for many years after these were written she continued to use her pen to further the numberless causes she had at heart, "not slothful in business, fervent in spirit" she was until the end, yet her nurses were always nearest her heart. She closes the last address in this book with "Once more, my heartiest sympathy, my dearest love to each and to all of you, from your ever faithful old comrade,

FLORENCE NIGHTINGALE."

THE HOSPITAL VERSUS THE GRADUATE SPECIAL NURSE¹

By MARY A. MORAN, R.N.

Augusta, Ga.

So much has been written on this subject by the "Special Nurse," that it would seem but fair to remind her that there are two sides to the question. I doubt if there exists a superintendent who would not be more than happy if she could provide ideal quarters and rest rooms for the graduate special nurses and I feel sure she would also like to provide a private dining room and a wardrobe for each nurse not only for the sake of the nurse but for her own peace of mind.

Let us first consider a few of the discomforts of the nurse. One nurse told me that in a hospital where she specialized a room was provided them for rest but that the ants were so numerous that they were even on the beds. In another hospital a room was provided in the basement in which the specials could dress and on rainy days, what with umbrellas and wet clothes, it was well nigh impossible to get into uniform. They had six hours for sleep, which included the time they spent going to and from their rooms.

We all know of the awful indignities imposed upon both graduate and pupil special nurses in being asked to sleep on a cot in the same room with a male patient, often having to dress and undress in the same

¹ Read at the Eighth Annual Convention of the Georgia State Association of Graduate Nurses.

The Hospital Versus the Graduate Special Nurse 19

room. Surely the day is past when any well regulated hospital will allow this.

The food served to nurses in some hospitals is so poorly prepared that no woman can exist on it and do good work. This is especially the case with the night nurses. I was visiting in a hospital once and the flies were so numerous in the nurses' dining room that nothing but excessive hunger would cause anyone to eat under such hazardous conditions.

Some nurses complain about lack of relief for hours off duty. There seems to be very little excuse for this.

On another occasion, in a large hospital, a special nurse, whose patient died at 2 a.m., was told that she would be expected to go home at that hour. When she remonstrated with the night superintendent, she was finally allowed to sit alone in a cold reception room in the nurses' home until morning. Can you imagine such barbarous treatment? In that same hospital a graduate nurse, wishing a dose of medicine for her patient, had it measured out to her by a pupil nurse and in another hospital the nurse had to go up three floors, three times daily, for medicine, in spite of the fact that it was reported to the head nurse.

Now to my mind, these are all grievances which no nurse should stand and they would not happen in any well regulated hospital. It seems to me, however, that the proper thing to do in each instance would be to report any of the above complaints to the superintendent of nurses. If she did not correct it, then it should be reported to the superintendent of the hospital. I cannot conceive of any superintendent allowing this state of affairs to go on. Possibly she did not know it, for with her busy life, it might be that this state of affairs had been overlooked. If, however, it had been reported and not corrected, I believe a nurse would be justified in reporting the hospital to the state or alumnae association for them to take action, as it is just such errors as these that our associations can correct.

Now, let us glance at the other side of the question. When a nurse comes to a hospital on a special case, her attitude should be exactly the same as if she went to a private home. She would not expect to ride roughshod over those in authority in a private home, why then should she show so little courtesy to those in authority in the hospital?

In the private home, if she were told that meals were served at a certain hour, if she were relieved, she would certainly go to meals as requested. Why should she do otherwise in a hospital. I have known nurses who never went to meals in time, as they invariably started to do something for their patients just at meal time that could have been done just as well either sooner or later. Naturally the meals were cold

and the servants in bad humor at being unnecessarily detained. This lack of punctuality, if not controlled, makes no end of trouble in any institution.

Hospitals having training schools are obliged to arrange the hours to permit of regularity in class work. It does not take a very experienced observer long to realize what it means if the specials do not go off duty for their hours at the time specified by the head nurse. She is responsible for the relief only at the hours stipulated and specials should go off duty and return promptly as indicated, otherwise, there is a confusion of orders. On several occasions we have had specials on duty who, having been assigned certain hours, have remarked: "I should like to know what she has do to with me, I shall go off when I feel like it." One nurse who had an obstetrical case having stitches came to me one day and said: "I am going off now Miss Moran, I did not go at 2 o'clock. It really makes no difference as there is nothing to be done for my patient." Can you imagine how, with a patient having stitches and a baby to care for, any nurse could say positively that nothing would have to be done for two hours?

Some otherwise good nurses come to our institution and just as soon as they do all the necessary things for their patients, they at once collect at the hall tables and hold protracted conversations with other nurses, internes and visiting physicians, to the great annoyance of patients in the nearby rooms, or else they will congregate in diet kitchens and gossip with pupil nurses, talking slightly of the rules of the hospital and those in authority.

Of course, during the day, when a patient has visitors, we all realize that a nurse should not stay in the room with her patient but it does seem as if a nurse would be conscientious enough, when she knows a patient in the hospital pays her \$25.00 a week in order not to be left alone except as necessary, to remember this. We all know of the many dreadful things happening in hospitals because special nurses left patients while they gossiped with internes and nurses.

Now as to the uniform: if a man goes into the United States Army or a nurse goes into the Red Cross Service, they will wear the uniform of the service and have no discussion about it. It is unbelievable, but one-half of the nurses come to the hospital and either wear no caps or else they wear lace trimmed waists, shoes without rubber heels, and, on some occasions, I have had patients ask me if graduate nurses were probationers. When I said, "No, she is a graduate nurse," they would say, "She is dressed like a probationer." I always lose respect for a nurse as soon as she drops her uniform and by this I mean entire uniform, as a white dress does not mean uniform.

The Hospital Versus the Graduate Special Nurse 21

I always remember the address given by one of the foremost surgeons of the country to my class when I graduated. He said, "Young ladies, always wear your caps. It is your badge of authority. When you leave it off you lose caste." So whenever I enter a hospital and see either superintendent or graduate nurse without a cap and full uniform, I feel at once that there is something lacking in the discipline of that school. It is very unpleasant for a superintendent to have to tell a nurse she cannot take a special case, unless she wears a cap and full uniform with rubber heels on her shoes.

Another complaint made by physicians is that special nurses do too much visiting from one room to another. This should never happen, as it causes much dissatisfaction among physicians.

A hospital, like a private individual, always selects the nurses who give the best service and cause the least confusion. When a superintendent sees that a nurse has no desire to respect her wishes she naturally does not call that nurse any more often than possible. Consequently all nurses should realize that if they wish to do special nursing in hospitals they must respect the rules and instead of criticising the hospital and superintendent, should help her, for in many instances no nurse in the hospital works as hard or has hours so irregular as the superintendent. If the superintendent of nurses had the building of the hospitals, there would be complete provision made for all special nurses, for no one realizes better than she does, how hard it is to work under present day methods and difficulties.

It is usually better to employ graduates of the school when special nurses are desired, as they know the rules and where the various things are kept, but if these are not loyal women it is better to get someone else.

Every superintendent should do all in her power to make the life of the special nurse easier. She should see that the nurse gets good food and sufficient sleep. The special nurse should in turn, respect the wishes of the superintendent or else she should not take a case in the hospital. The special nurses of today may be the superintendents of tomorrow and then they will find out who bore the burden of today.

A great deal of unpleasantness will be obviated if, upon the arrival of a nurse ignorant of the rules governing the special nurses while on duty, the head nurse or superintendent would explain them to her. The nurse should take this as a kindness, for as such it is intended, and not become indignant as a great many nurses do. She should also go for her supplies at the regular time, as nothing is more annoying than to have nurses coming for drugs and sheets and supplies at irregular intervals.

It would be well for all special nurses to remember the time when

they were pupils and how annoyed they were when special nurses, in preparing nourishments or performing other duties, left the diet kitchen and service rooms untidy. Many of us as pupils have felt this keenly. It does seem as if special nurses would remember those days and clean up each time all traces of their work, so that pupils would welcome, instead of bemoan, their advent to the hospital.

Whenever a nurse speaks disrespectfully of her alma mater or her superior nurses she at once brands herself as disloyal and not to be trusted, for if she were a loyal nurse she should help the superintendent and the school instead of criticizing it to strangers or pupils. A school is never helped by the criticisms of its graduates. If they know the pupils are not getting the proper course and they wish to help the school, they should, in a womanly way, tell the superintendent of nurses and if she does not correct the trouble, report it to the alumnae or state association. This would help the nurses as well as the school.

BUILDING UP A BABY

By RUTH BREWSTER SHERMAN, R.N.

Baltimore, Md.

Betty was one of "my babies," the fourth child of healthy parents, herself well developed, healthy and normal in every way. She was nursed for two weeks, then fed on modified milk—weight, eight and one-half pounds at birth, at one month, ten and one-half pounds. Her mother died last year and the baby was later cared for by an opinionated elderly nursemaid who took directions from neither family nor doctor. When Betty was twenty-two months old I took charge of her for three weeks while her nurse took a vacation.

This is what I found: a chilly nursery with windows closed; a pale, quiet, unanimated child with insufficient clothing. Her flesh was flabby, hands and feet cold, expression wistful and anxious, appetite poor. There were blue hollows under the eyes, a greenish tinge around the mouth, lustreless hair. On her chin was a small bleeding sore of the kind often found on children of low vitality and poorly nourished, on her cheeks were the blue marks left by two previous sores. Evidently Betty, though not sick, was far below a normal condition.

Her outdoor exercise had been riding in her carriage or in a carriage with closed windows. Her diet had been diluted milk, chicken broth, toast and unsweetened cereals with limited drinking water, one ounce of orange juice daily, and daily medicine for constipation. Though nearly two years old she weighed only twenty-two and one-half